

*The British Medical Journal  
with the M.O.H.'s  
Compliments*

COUNTY OF CORNWALL,

District No. 31.

✧ **ST. IVES** ✧

URBAN SANITARY AUTHORITY.



MEDICAL OFFICER'S ✧

✧ ANNUAL REPORT,

**1909.**

THE ST. IVES  
URBAN SANITARY AUTHORITY.

---

*To the Mayor, Aldermen & Councillors.*

*Gentlemen,*

*I beg to present the following as my Annual  
Report of the St. Ives Urban Sanitary District for 1909,*

*And remain,*

*Yours faithfully,*

J. M. NICHOLLS,

M.O.H.

*February, 1910.*

1909.

St. Ives Urban Sanitary Authority.

MEDICAL OFFICER'S ANNUAL REPORT.

Area, 1,100 Statute Acres.	Population, 1881, 6,445.
	„ 1891, 6,094.
Density of population per acre, 6.69.	„ 1901, 6,699.
Emigrants (1909) 48.	Immigrants (1909) 110
Inhabited houses, 1904	.... 1,800.
„ „ 1905	.. .... 1,810.
„ „ 1906	.... .... 1,814.
„ „ 1907	.... .... 1,846.
„ „ 1908	.... .... 1,858.
„ „ 1909	.... .... 1,876.

Births Registered, 176 (males 95 ; females 81).  
Deaths „ 95 (males 37 ; females 58).—Natural Increase, 81.

	1904.	1905.	1906.	1907.	1908.	1909.
Birthrate per 1000 of population	21.94	29.70	25.07	25.52	29.72	26.27
Deathrate „ „	9.70	13.43	18.82	12.68	15.82	14.18

Classification of Ages and Deaths.

	1 yr. & under.		1 to 5 yrs.		5 to 15 yrs.		15 to 25 yrs.		25 to 65 yrs.		65 to 80 yrs.		Over 80.		Over 90.		Total.
January .....	—	....	I	....	I	....	—	....	3	....	—	....	3	....	—		8
February.....	2	....	—	....	—	....	—	....	4	....	I	....	3	....	I		11
March .....	3	....	I	....	—	....	—	....	3	....	4	....	3	....	—		14
April .....	2	....	—	....	—	....	—	....	2	..	I	....	—	....	—		5
May.....	—	....	—	....	—	....	I	....	2	...	—	....	I	....	—		4
June .....	—	....	—	....	—	....	—	....	—	....	3	....	—	....	—		3
July .....	—	....	I	....	—	....	—	....	—	....	3	....	—	....	—		4
August.....	I	...	—	....	—	....	—	....	4	....	4	....	—	....	I		10
September ...	I	....	—	....	—	....	—	....	4	....	—	....	I	....	—		6
October .....	3	....	—	....	I	....	—	....	I	....	—	....	—	....	—		5
November ...	I	....	—	....	—	....	—	....	6	....	4	....	2	....	—		13
December ...	2	....	—	....	—	....	I	....	4	....	4	....	I	....	—		12
	15		3		2		2		33		24		14		2		95

2 Illegitimate births : at the rate of .29 per 1000 of population ; or 1 in 88 births.

No Illegitimate death.

---

### Analysis of Deaths.

1904	1905	1906	1907	1908	1909			
6 ...	9 ...	10 ...	12 ...	18 ...	10	deaths were due to disease of the	Nervous System.	
12 ...	10 ...	9 ...	15 ...	10 ...	17	„	„	Circulatory System.
4 ...	15 ...	39 ...	15 ...	23 ...	17	„	„	Respiratory System.
4 ...	7 ...	9 ...	4 ...	8 ...	6	„	„	Alimentary System.
3 ...	6 ...	5 ...	0 ...	13 ...	5	„	„	Genito-Urinary System.
8 ...	12 ...	15 ...	12 ...	8 ...	7	„	„	Lymphatic System.
0 ...	5 ...	5 ...	4 ...	7 ...	0	„		Zymotic diseases.
14 ...	17 ...	15 ...	10 ...	13 ...	18	„		Senile decay.
11 ...	2 ...	7 ...	5 ...	3 ...	8	„		Marasmus and Convulsions.
1 ...	5 ...	3 ...	2 ...	2 ...	4	„		Premature Births and Malformations.
2 ...	2 ...	8 ...	9 ...	7 ...	3	Inquests.		

Inquest Cases.—Causes of deaths :—

(1) Natural Causes, 1.

(2) Accidental falls, 2.

---

**Zymotic Mortality.**—Nil.

**Cancer Mortality.**—7 deaths. (2 males, aged 63 and 72 years, and 5 females, aged 43, 51, 54, 72 and 73 years.)

An average rate of 1.04 per 1000 of population.

**Phthisical Mortality.**—6 deaths. (3 males, aged 42, 48 and 74 years, and 3 females, aged 29, 30 and 42 years.) One of the males was a gold miner returned from Africa. Two males and one female were visitors.

An average rate of .89 of population, or excluding the miner .74 per 1000 of population.

**Respiratory Mortality.**—11 deaths from Pneumonia and Bronchitis, giving a deathrate of 1.64 per 1000 of population. These deaths occurred in the following months :—

Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1 ...	1 ...	3 ...	1 ...	— ...	— ...	— ...	— ...	— ...	— ...	2 ...	3

2 deaths were infants under 12 months and one 15 months.

Other deaths were 4 males, aged 2, 42, 57 and 60 years.

4 females, aged 64, 66, 77 and 85 years.

**Infant Mortality.**—15 deaths (under twelve months):—Deathrate 2·23 per 1000 of population, or at the rate of 85 deaths to 1000 births.

It compares with previous years as follows :—

1904.—15 deaths, at the rate of 100 to 1000 births.			
1905.—16	„	„	80
1906.—25	„	„	148
1907.—12	„	„	70
1908.—17	„	„	85
1909.—15	„	„	85

The causes of death were :—

Premature Births	Congenital Debility and Malnutrition	Acute Meningitis	Convulsions	Broncho-Pneumonia
4	7	1	1	2

**Influenza Mortality.**—Nil.

NOTIFICATION OF DISEASE.

2 cases notified, giving a rate of ·29 per 1000 of population.

Analysis of Cases Notified.

	Erysipelas.	Scarlet Fever.
January.....	.....	.....
February .....	.....	.....
March .....	.....	.....
April .....	.....	.....
May .....	.....	.....
June .....	.....	.....
July .....	.....	.....
August .....	.....	.....
September.....	.....	.....
October .....	.....	.....
November.....	1	.....
December.....	.....	1
	1	1
Rate per 1000 of population	·13	·13

Total cases notified, 2.

Total rate per 1000 of population, ·29.



Cases notified during the past 10 years :

1909.— 2 cases.	1905.— 4 cases.
1908.— 5 „	1904.— 1 „
1907.— 9 „	1903.— 4 „
1906.— 10 „	1902.— 6 „
1905.— 4 „	1901.— 32 „

---

### EPIDEMICS.

No epidemic sickness.

---

### FACTORY AND WORKSHOPS ACT, 1901.

This Act appears to be efficiently carried out in the town ; and the Buildings and Sanitary conditions generally satisfactory.

---

### SHIPPING INSPECTIONS.

These were satisfactory. No sickness occurred in seamen returning from Foreign-going infected ships.

---

### WATER SUPPLY.

The completion of the new Reservoir should be the settlement of our Water Supply for many years.

This is a very fine reserve of water, covering 7 acres, and holding 23 million gallons. This should supply us during a prolonged period of drought, and also permit of an extension of the Town in any direction. Being situated over 400 feet above sea level, the water is now available without the necessity of pumping to a higher level, as has been the case previously.

The analysis of the water has been very good ; but the addition of high pressure filters, will now ensure its being as pure as it is possible to get it.

The work connected with the Reservoir appears to be very strong and substantial, and the construction thoroughly well done.

## HOUSE INSPECTIONS.

These have been generally satisfactory, and point to still further improvements in structure and Sanitary efficiency. I would repeat the warning given in previous years as to the necessity of care with regard to the dangers with water closets in small dwellings, also with regard to damp dwellings and efficient ventilation, by having windows to open easily. Many houses are still without launders to carry off roof water, and are consequently damp.

---

## THE SANITARY CONDITION OF THE TOWN.

Some further progress has been made in extending the sewage scheme, both in improving old properties and in providing for the further development of the town.

The old complaint of refuse, carelessly and frequently wilfully thrown in certain places is still continued in certain places. This is inexcusable, when we have so many refuse collecting carts.

The scavenging and refuse collecting is generally carried out satisfactorily, and the condition of the streets is still further improving, and compares very favourably with previous years.

---

## DAIRIES, COWSHEDS AND MILKSHOPS INSPECTIONS.

These are regularly inspected, and found clean, well ventilated, and otherwise well kept.

---

## SLAUGHTER HOUSES.

These are fairly well kept, and attention is paid to the prompt removal of refuse.

---

## NEW BUILDINGS.

40 have been certified as fit for occupation.

12 houses, shops and cottages have been renovated, and certified as habitable.

12 old houses have been taken down, and new ones built.

New and substantial buildings continue to be erected, and appear to meet a demand.

---

## GENERAL REMARKS.

The general health of the town has been good, and preventible disease and zymotic sickness has very rarely occurred.

The notification rate has again been very low, the lowest (except for 1 year) since the Notification Act was adopted 16 years ago, as shown under the heading "Notification of Disease."

The Birthrate is again satisfactory; the Deathrate is favourable, and except in a few cases it is not due to causes which may be looked upon as preventible.

The **Cancer Mortality** is at about the average rate.

The **Phthisical Mortality** is doubled, by visitors, who were well advanced in the disease when they came into the district.

The Infantile Mortality is favourable. Eleven of the 15 deaths were of premature and delicate children who failed to have a good start in life; so that only four deaths were of mature and normally healthy children.

J. M. NICHOLLS,

L.R.C.P., Lond., M.R.C.S., Eng.,

Medical Officer of Health.

February, 1909.